PATEIXI APPLICATION FEE DETENNINATION DECO	PA	TENT	APPL	ICATION	FEE D	ETERMINATION	RECOR
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Effective October 1, 2000

9/195177

Application or Docket Number

Effective October 1, 2000								9	1685	07	77	
			S FILED - PART I		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS							R	ATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			57 minus 20= *		* 37	• 37		\$ 9=		OR	X\$18=	666
INE	EPENDENT CL	AIMS	20 minus 3 = 17			×	40=		OR	X80=	1360	
MULTIPLE DEPENDENT CLAIM PRESENT						+	135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TO	OTAL		OR	TOTAL	2736
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SI	/ALL	ENTITY	OR	OTHER SMALL	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	· 51	Minus	·-2	0	=37	×	\$ 9=		OR	X\$18=	ofto.
AME	Independent	· 31	Minus	*** ~	3	= /	X	40=		OR	X80=	80.00
<u> </u>	FIRST PRESE	NTATION OF MI	JETIPLE DEF	ENDEN	CLAIIVI		+	35=		OR	+270=	
							ADD	TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Co <u>lu</u>		(Column 3)				•		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM	OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X	\$ 9=		о'n	X\$18=	
	Independent	* NTATION OF MI	Minus	***	F CL AIM	=	X	40=		OR	X80=	
<u> </u>	FINOT PRESE	NIATION OF IN	JEHPLE DEF	ENDEN	CLAIM		+1	35=		OR	+270=	
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)	,					
AMENDMENT C	(f. 8)	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] x:	§ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	5014114	=	X	40=		OR	X80=	
Ľ.	FIRST PRESE	NTATION OF M	JLIIPLE DEF	'ENDEN	CLAIM		J	35=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												